

#### **Instructions**

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## 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

# Relationships not covered above.

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Other: Anything not covered under the previous three boxes

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**Royalties:** Funds are coming in to you or your institution due to your patent

Nelson 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Heidi	rst Name)	2. Surname (Last Name) Nelson	3. Date 25-June-2014
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Dik Habbema
5. Manuscript Title Models in the De	e evelopment of Clinical	Practice Guidelines	
6. Manuscript Ide M14-0845	ntifying Number (if you kr	now it)	
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Section 2.	The Work Under C	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.
of compensation clicking the "Add	n) with entities as descr	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4.	Intellectual Prope	rty Patents & Copyric	ahts
Do you have any			roadly relevant to the work? Yes V No

Nelson 2



Section 5.	Deletionshing not covered above
	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
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	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Nelson has no	othing to disclose.

### **Evaluation and Feedback**

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Kuntz 1



Section 1. Id	lentifying Informa	ntion	
1. Given Name (First N Karen	lame)	2. Surname (Last Name Kuntz	2) 3. Date 25-June-2014
4. Are you the corresp	onding author?	Yes ✓ No	Corresponding Author's Name
5. Manuscript Title Models in the Devel	opment of Clinical Pr	actice Guidelines	
6. Manuscript Identify M14-0845	ring Number (if you kno	w it)	
Section 2. Th	ne Work Under Co	nsideration for Pu	blication
any aspect of the subm statistical analysis, etc.)	nitted work (including b	out not limited to grants	rom a third party (government, commercial, private foundation, etc.) for s, data monitoring board, study design, manuscript preparation, o
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of compensation) wi clicking the "Add +"	ith entities as describ	ed in the instructions ort relationships that	whether you have financial relationships (regardless of amount . Use one line for each entity; add as many lines as you need by were <b>present during the 36 months prior to publication</b> .
Section 4. In	tellectual Propert	y Patents & Copy	yrights
Do you have any pat	tents, whether planne	ed, pending or issued	, broadly relevant to the work? Yes V No

Kuntz 2



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K	elationships not covered above
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Yes, the followin	g relationships/conditions/circumstances are present (explain below):
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Dr. Kuntz has nothii	ng to disclose.

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Lawrence 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi William	rst Name)	Surname (Last Name)     Lawrence	3. Date 26-June-2014
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Dik Habbema
5. Manuscript Title Models in the De	e evelopment of Clinical I	Practice Guidelines	
6. Manuscript Ider M14-0845	ntifying Number (if you kr	now it)	
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Lawrence 2



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Dr. Lawrence has nothing to disclose.

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Schechter 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fii Clyde	rst Name)	2. Surname (Last Name) Schechter	3. Date 26-June-2014
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name  J. Dik Habbema
5. Manuscript Title Models in the De	evelopment of Clinical	Practice Guidelines	
6. Manuscript Ider M14-0845	ntifying Number (if you kr	now it)	
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Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Schechter 2



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Wilt 1



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1. Given Name (Fi Timothy	rst Name)	2. Surname (Last Name) Wilt	3. Date 24-September-2014
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Dr. Habbema
5. Manuscript Title "Models in the D	e Pevelopment of Clinical	Practice Guidelines"	
6. Manuscript Ide M14-0845	ntifying Number (if you kr	now it)	
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Etzioni 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Ruth	. , ,	2. Surname (Last Name) Etzioni	3. Date 24-September-2014
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name  J.D.F. Habbema
5. Manuscript Title Models in the De	e evelopment of Clinical I	Practice Guidelines	
6. Manuscript Ide M14-0845	ntifying Number (if you kr	now it)	
			_
Section 2.	The Work Under C	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.
of compensation clicking the "Add	n) with entities as descri	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
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Do you have any			roadly relevant to the work? Yes V No

Etzioni 2



Section 5. Relationships not covered above
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Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
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Habbema 1



Section 1.	Identifying Inform	nation			
1. Given Name (First Name) Dik		2. Surname (Last Na Habbema	me)	3. Date 27-June-2014	
4. Are you the cor	responding author?	✓ Yes No			
5. Manuscript Title Models in the Development of Clinical Practice Guidelines					
6. Manuscript lder M14-0845	6. Manuscript Identifying Number (if you know it) M14-0845				
Section 2.	The Work Under C	onsideration for F	ublication		
Did you or your institution <b>at any time</b> receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  Are there any relevant conflicts of interest?  Yes  No					
Section 3.	Polovant financial	activities outside	the submitted work.		
of compensation clicking the "Add	the appropriate boxes i n) with entities as descri	in the table to indica ibed in the instructio port relationships tha	te whether you have financial rel	lationships (regardless of amount add as many lines as you need by <b>nonths prior to publication</b> .	
Section 4.	Intellectual Prope	rty Patents & Co	pyrights		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

Habbema 2



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Melnikow 1



Section 1. Identif	ying Information			
Given Name (First Name)  Joy	2. Surname (Last Name Melnikow	) 3. Date 24-September-2014		
4. Are you the corresponding	g author? Yes Vo	Corresponding Author's Name  J.Dik.F. Habbema, PhD		
5. Manuscript Title Models in the Developme	nt of Clinical Practice Guidelines			
6. Manuscript Identifying Nu M14-0845	mber (if you know it)			
Section 2. The Wo	ork Under Consideration for Pub	olication		
Did you or your institution <b>at any time</b> receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  Are there any relevant conflicts of interest?  Yes  No				
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Section 4. Intellec	tual Property Patents & Copy	rights		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Melnikow 2



Section 5.				
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Owens 1



Section 1. Ide	entifying Informat	tion		
1. Given Name (First Na Douglas	•	2. Surname (Last Name) Owens		3. Date 24-September-2014
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name j d f habbema	
5. Manuscript Title Models in the Develo	pment of Clinical Pra	actice Guidelines		
6. Manuscript Identifyin M14-0845	ng Number (if you knov	v it)		
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of compensation) witl	h entities as describe ox. You should repor	ed in the instructions. Urt relationships that we		ationships (regardless of amount dd as many lines as you need by conths prior to publication.
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Feuer 1



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